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**Date:** November 17, 2004

**# of pages:** 18 (including this page)

**Re:** Response to Restriction Requirement and Supplemental Information Disclosure Statement  
U. S. Serial Number 10/627,555 Attorney Docket No: P-154-US1  
**Examiner:** Shailendra Kumar Group Art Unit: 1621

## Attached are the following documents:

1. Response to Restriction Requirement (13 pages)
2. Supplemental Information Disclosure Statement (2 pages)
3. Information Disclosure Statement by Applicant (Form PTO/SB/08a) – 1 page
4. Transmittal Form (1 page)

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PTO/SB/21 (09-04)


Approved for use through 07/31/2008. OMB 0551-0031

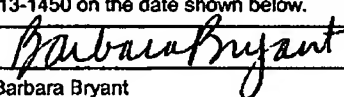
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/627,555	
	Filing Date	July 25, 2003	
	First Named Inventor	Martin S. LINSELL	
	Art Unit	1621	
	Examiner Name	Shailendra Kumar	
Total Number of Pages in This Submission	18	Attorney Docket Number	P-154-US1

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC: (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Please see below Remarks
<b>Remarks</b> Enclosed are the following: 1. Response to Restriction Requirement (13 pages) 2. Supplemental Information Disclosure Statement (2 pages) 3. Information Disclosure Statement by Applicant (Form SB/08a) - 1 page 4. Facsimile cover page (1 page)		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	THERAVANCE, INC.		
Signature			
Printed Name	Roberta P. Saxon		
Date	November 17, 2004	Reg. No.	43,087

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November 17, 2004

PATENT

Attorney Docket No. P-154-US1

Customer Number 27038

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

LINSELL et al.

Application No.: 10/627,555

Filed: July 25, 2003

For: CRYSTALLINE  $\beta_2$  ADRENERGIC  
RECEPTOR AGONIST)  
)  
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)  
)  
)

Group Art Unit: 1621

Examiner: Shailendra Kumar

RESPONSE TO RESTRICTION REQUIREMENT

Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

Sir:

This reply is being filed in response to the Office Action mailed on October 22, 2004 for the above-identified patent application. The Office Action set a one-month period for response and therefore, this reply is due on or before November 22, 2004. Reconsideration of the application in view of the following remarks is respectfully requested.

Attorney Docket No. P-154-US1  
Application Serial No. 10/627,555

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